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The Editorial Board will be glad to receive and consider for publication letters containing information of general interest to physicians throughout the State or presenting constructive criticisms on controversial issues of the day. Also News and Notes items regarding the affairs and activities of hospitals, individuals, communities and local medical societies and groups throughout the State.

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John G. Morrison.....President
333 Escondido, San Leandro
Stanley Truman.....Secretary
1904 Franklin St., Oakland

BUTTE-GLENN Medical Society. Meets Fourth Thursday.
Rufus C. Rucker.....President
188 E. 5th St., Chico
Jay O. Gibson.....Secretary
170 E. 2nd Ave., Chico

FRESNO County Medical Society, 2155 Amador, Fresno. Meets Second Tuesday, 6:30 p.m., Sunnyside County Club.
L. J. Snyder.....President
1212 Security Bank Bldg., Fresno
Walter Rohlfing.....Secretary
2155 Amador, Fresno

HUMBOLDT County Medical Society. Meets Second Thursday.
Charles Earl.....President
951 1st, Arcata
Don Lowe.....Secretary
730 7th St., Eureka

IMPERIAL County Medical Society. Meets Second Tuesday, 8 p.m., Pioneer Memorial Hospital, Brawley.
Willis Irwin.....President
647 Pine Ave., Holtville
Ernest Brock.....Secretary
200 S. Imperial Ave., Imperial

INYO-MONO County Medical Society. Meets Fourth Tuesday except December, January, February.
C. L. Scott.....President
287 W. Academy Ave., Bishop
Victor H. Hough.....Secretary
Box 175, Lone Pine

KERN County Medical Society, 2603 G Street, Bakersfield. Meets Third Tuesday, 7:30 p.m., Saddle and Sirloin, except June, July, August.
William H. Moore, Jr.....President
1715 28th St., Bakersfield
Harold C. Freedman.....Secretary
406 James St., Shafter

KINGS County Medical Society. Meets Second Monday, 8:00 p.m., Legion Hall, Hanford.
Glen Bean.....President
1105 N. Dooty, Hanford
R. W. Burgoyne.....Secretary
210 Heinlen Ave., Lemoore

LASSEN-PLUMAS-MODOC County Medical Society. Meets on call.
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Medico-Dental Bldg., Alturas
Willard S. Bross, Jr.....Secretary
Western Pacific Hospital, Portola

LOS ANGELES County Medical Assn., 1925 Wilshire Blvd., Los Angeles 57. Meets First and Third Thursdays, 1925 Wilshire Blvd., Los Angeles.
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1925 Wilshire Blvd., Los Angeles 57
Ian G. MacDonald.....Secretary
1925 Wilshire Blvd., Los Angeles 57

MADERA County Medical Society.
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501 E. Yosemite Ave., Madera
Rex Blumhagen.....Secretary
109 South B St., Madera

MARIN County Medical Society, 1703 Fifth Ave., San Rafael. Meets First Thursday, 7:00 p.m.
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Calvin Plumbhof.....Secretary
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R. B. Smalley.....Secretary
361 S. Main St., Willits

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2448 M St., Merced
Zdenek Fluss.....Secretary
2434 M St., Merced

MONTEREY County Medical Society, P. O. Box 308, Salinas. Meets First Thursday.
LeGrand Woolley.....President
460 Pierce St., Monterey
Osman Hull.....Secretary
70 Oliver Rd., Rt. No. 1, Carmel

NAPA County Medical Society. Meets Second Wednesday, 908 Trancas Street, Napa
Clinton J. Sevensen.....President
1735 Jefferson St., Napa
Houghton Gifford.....Secretary
P. O. Box 780, Napa

ORANGE County Medical Association, 1226 N. Broadway, Santa Ana. Meets First Tuesday, 7:00 p.m.
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William K. Friend.....Secretary
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PLACER-NEVADA-SIERRA County Medical Society. Meets Second Wednesday.
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Donald H. Abbott.....Secretary
4029 Brockton Ave., Riverside

SACRAMENTO Society for Medical Improvement, 2731 Capitol Ave., Sacramento. Meets Third Tuesday, 8:30 p.m., Sutter Hospital Auditorium.
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James Dowrie.....Secretary
3430 Balmoral Dr., Sacramento 21

SAN BENITO County Medical Society. Meets First Thursday, Hazel Hawkins Memorial Hospital, Hollister.
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P. O. Box 248, Hollister

SAN BERNARDINO County Medical Society, 615 D St., San Bernardino. Meets First Tuesday, 8:00 p.m., San Bernardino County Charity Hospital.
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George W. Smith.....Secretary
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SAN DIEGO County Medical Society, 3427 - 4th Ave., San Diego 3. Meets Second Tuesday, San Diego Club, 1250 Sixth Ave., San Diego 10.
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Dora A. Lee.....Secretary
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SAN LUIS OBISPO County Medical Society. Meets Third Saturday, 7:00 p.m., Anderson Hotel, San Luis Obispo.
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Alan D. Watson.....Secretary
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SAN MATEO County Medical Society, 122 El Camino Real, San Mateo. Meets Third Tuesday.
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John T. Saily.....Secretary
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California Medicine Index of Advertisers, beginning with this issue, will list not only the manufacturers' names, but also a page number for each product or service. We hope that this will make your journal more useful and convenient.

THE ADVERTISING DEPARTMENT

Tetracycline Phosphate Complex (TETREX®)

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in the Therapy of PNEUMONIA

Preferably, antibiotic therapy should be based on pretreatment culture of the offending pathogen, but in bacterial pneumonia the problem may well be too pressing to permit the required delay of 24 to 48 hours. A differential diagnosis among bacterial pneumonias, based on such clinical grounds as speed of onset, sepsis and pain may guide the choice of antibiotic for initiation of therapy.

Should clinical judgment dictate that antibiotic therapy be started immediately, at the same time a sputum sample or a subglottic swab can be sent to the laboratory for culture and sensitivity studies. If the response to the first antimicrobial agent proves unsatisfactory, a reasonable basis for changing therapy will then be at hand.

Choosing the Antibiotic

Since therapy must be started at once for bacterial pneumonia, it is advisable to choose a broad-spectrum antibiotic that quickly produces high levels of active agent (e.g., tetracycline phosphate complex, TETREX). Such an antibiotic probably has the best chance of controlling the pathogen, whether it be gram-negative or gram-positive. And if the laboratory report shows that the invading organism is much less sensitive to tetracycline than to other agents, the patient can then be changed to an appropriate antibiotic. If the difference in sensitivity is slight, then the possibility of side effects, sensitization, and toxicity should be evaluated before changing therapy to another antibiotic.

The greatest number of bacterial pneumonias are caused by pneumococci, which respond very well to penicillin, tetracycline, and chloramphenicol. Also, these antibiotics are usually effective against the other gram-positive coccil pneumonias. But penicillin is ineffective against the viral pneumonias and the gram-negative *Hemophilus influenzae* and *Klebsiella pneumoniae*. Although *K. pneumoniae* causes only about 1 to 2 per cent of pneumonia cases on the average,¹ these are apt to be acute and fulminating (Friedländer's pneumonia), with a high mortality rate if not effectively treated. Since pneumococcal pneumonia may be difficult to distinguish clinically from Friedländer's, except by gram-stained sputum smear, it may be wiser to start treatment with an agent also effective against *Klebsiella*.

Penicillin, however, in addition to having a lim-

ited spectrum, also causes many minor and some serious sensitivity reactions. In a recent survey² it was found that penicillin produced severe skin reactions. But most important was the observation that anaphylactic shock, with a fatality rate of about 9 per cent, was the most frequent serious reaction. Such severe reactions are almost always associated with parenteral administration.

Tetracycline is also clinically effective in primary atypical pneumonia.³

The tetracyclines (e.g., TETREX) have the advantages of a broad range of antimicrobial activity and low toxicity. And in addition, the physician does not have to trouble himself or his patients with repeated blood studies when he prescribes TETREX. Minor reactions such as gastric upsets or mild skin rashes occur occasionally. The most serious side effects are staphylococcal and monilial overgrowth, but these are rare and can be adequately controlled.

No one would deny that appropriate antibiotic therapy has greatly reduced morbidity and saved many lives of patients with bacterial pneumonia. Nevertheless, general supportive measures in the care of patients remain important even today. Especially in the desperately ill patient, antibiotics are not considered as substitutes for the individual evaluation, clinical observation and judgment of the physician.

Some Micro-organisms Susceptible^a to Tetracycline (TETREX)^b

Streptococcus; *Staphylococcus*; *Pneumococcus*; *Gonococcus*; *Meningococcus*; *C. diphtheriae*; *B. anthracis*; *E. coli*; *Proteus*; *A. aerogenes*; *Ps. aeruginosa*; *K. pneumoniae*; *Shigella*; *Brucella*; *P. tularensis*; *H. influenzae*; *T. pallidum*; *Rickettsiae*; *Viruses of psittacosis and ornithosis*, *lymphogranuloma inguinale*, primary atypical pneumonia; *E. histolytica*; *D. granulomatosis*.

^a Some strains are not susceptible.

^b Table adapted from Goodman, L. S., and Gilman, A.: *The Pharmaceutical Basis of Therapeutics*. 2nd edition, New York, The Macmillan Co., 1956, pp. 1322-1323.

References: 1. Wood, W. E., Jr.: In: *A Textbook of Medicine*. Edited by Cecil, R. L., and Loeb, R. F., 9th edition, Philadelphia, W. B. Saunders Co., 1955, p. 145. 2. Welch, H.; Lewis, C. H.; Weinstein, H. I., and Boeckman, B. B.: Severe reactions to antibiotics. A nationwide survey. *Antibiotic Med. & Clin. Ther.* 4:800 (Dec.) 1957. 3. Keefer, C. S.: The choice of an anti-infective agent. In: *Drugs of Choice*, 1958-1959. Edited by Walter Modell, St. Louis, The C. V. Mosby Co., 1958, p. 135.

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Enlarged Arteries Found In Lungs of Heavy Smokers

Significant variations in the diameter of arteries of the lungs of heavy smokers as compared with those of nonsmokers have been found in a study of chest x-rays.

Dr. Josue Pagan-Carlo, department of radiology, Touro Infirmary, New Orleans, reported the findings in the *Journal of the American Medical Association*.

The arterial shadows on routine chest x-rays of 694 smokers and nonsmokers were measured by calipers in the study.

In the area of the right descending pulmonary artery, Dr. Pagan-Carlo said, the study revealed that average measurements of the arteries of heavy smokers were significantly higher than for nonsmokers.

A heavy smoker was defined as one who smokes more than 30 cigarettes a day.

The expansion of the pulmonary artery in heavy smokers may result from constriction of the smaller branches of the artery brought on by the chronic effect of nicotine, he said.

"No one knows all the possible reflexes initiated in the lungs as a result of . . . the effects of the irritating inhalants in the tobacco smoke," he said.


Dr. Pagan-Carlo pointed out that "no significant difference was demonstrable in the vascular markings of light and moderate smokers, as compared to nonsmokers."

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School Deans Report on Medical Advancements During 1959

Deans of American medical schools told recently how the progress of medical science brought new health and new hope to the American people during 1959.

The deans of 84 schools, polled by the American Medical Association on what they thought were the greatest medical achievements during the year, offered a plethora of divergent viewpoints, but they nearly all agreed on one point: intensive medical investigation is now going on in many quarters in the field of biochemical genetics.

Dr. William S. Stone, dean of the University of Maryland School of Medicine, said "the biggest single achievement in the field of scientific medicine in 1959 has been the increase in our knowledge of the chemistry of genetics."

This field deals with man's origins, his mode of development and reproduction of characteristics. Hence, the term genetics is applied to the study of heredity.

Man Can Plan to Improve Himself

Many biochemical geneticists, including Nobel laureates, are looking to the day when man can plan himself, and draft and carry out plans to improve the actual species as to intelligence, physique, and resistance to disease.

Dean Stafford L. Warren of the University of Cali-

fornia Medical Center, Los Angeles, said "a better understanding of the biochemistry of inhibition of nerve impulses was achieved in 1959, and the relation of such chemistry to epileptic seizures has led to some revolutionary thinking."

He added that significant contributions also have been made to fundamental knowledge of the learning process. "It has been possible," Dr. Warren said, "to trace on a brain-wave detecting device records of the learning process. As an animal learned a particular task at our center during the past year, a tracing of new electrical activity in a particular brain area could be recorded. This could be erased with drugs that caused the animal to temporarily forget what he had learned, but the tracing returned as the drug wore off."

Such basic learning, he said, may eventually achieve a better understanding of the nation's major problem of mental health and bring about better methods of treatment.

(Continued on Page 47)

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School Deans Report on Medical Advancements During 1959

(Continued from Page 44)

Open New Fields of Treatment

Americans who received Nobel Prizes in medicine in recent years, including the 1959 winners—Dr. Severo Ochoa of the New York College of Medicine, and Dr. Arthur Kornberg of Stanford University—have contributed immeasurably to biochemical genetics. Through their contributions they have opened up broad fields in the treatment and theory of a wide spectrum of disease. Their discoveries, capstones on previous work during more than half a century, have not only significant clinical implications, but shed

new light on the nature of life and the future of man as a species.

Dr. Charles A. Doan, dean of Ohio State University Medical School, Columbus, referred to what he termed "the great" discoveries of Drs. Ochoa and Kornberg. Their discoveries related to the biological synthesis of compounds called RNA and DNA for short.

"The synthesis of RNA and DNA perhaps will have more far-reaching influence and effect on future biologic concepts and control than any other single advance this past year, or for many previous years," said Dr. Doan, adding:

(Continued on Page 54)



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School Deans Report on Medical Advancements During 1959

(Continued from Page 47)

"The potential influence of the application of this knowledge to genetics in particular can only be imagined at this time."

Study Hereditary Information

"All life is chemistry," Dr. Ochoa said after hearing the news in October that he shared the Nobel Prize in medicine, and then added: "The more we know of these chemical reactions, the more we know of life."

DNA and RNA have been under study for years. DNA is acknowledged to be the chemical that, in

most living things, passes on hereditary information from one generation to the next.

The other chemical, RNA, is a key substance in the production of protein, which is essential in the maintenance of tissue. RNA is found in some viruses—those which cause poliomyelitis and one called tobacco mosaic virus which produces a disease in plants. RNA is thought also to pass on hereditary traits.

List Specific Investigations

The deans mentioned a number of specific medical investigations now being carried out in research centers throughout the country in the field of bio-

(Continued on Page 63)

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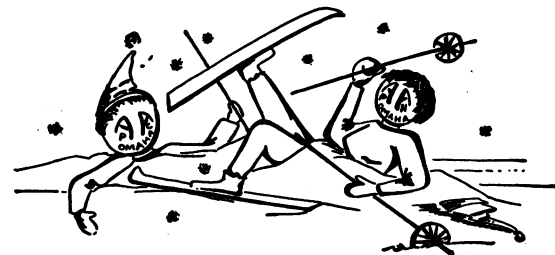


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Brain Damage Linked to Alcoholism, Malnutrition

Chronic alcoholism, or an associated nutritional defect, is related to brain deterioration, it was reported in the American Medical Association Archives of Neurology.

The report was made by three doctors of the Neurology Service, Massachusetts General Hospital, and the Department of Neurology, Harvard Medical School, who studied 50 severe alcoholics to determine the effect of alcohol on the nervous system.

The relationship of brain deterioration to chronic alcoholism has been a controversial matter for many years, according to Drs. Maurice Victor, Raymond D. Adams and Elliott L. Mancall.

They said their study had convinced them that a relationship does exist between the degeneration of that part of the brain concerned in the coordination of movements (specifically termed a restricted form of cerebellar cortical degeneration) and "the excessive imbibition of alcohol, or, perhaps more likely, to an associated nutritional defect."

The 46 men and 4 women studied were afflicted with remarkably similar symptoms, the doctors reported. In almost every instance they lacked muscular coordination of gait and of the legs.

The ailment should not be confused "with the transient variety which occurs in alcoholic patients after a severe drinking bout," they pointed out.

Of all the factors considered as possible causes of the brain damage, the doctors said, only two seemed of importance—alcohol and malnutrition.

"Although the abuse of alcohol was a feature common to all our patients, six patients had actually been abstinent for varying periods of time before the onset of their cerebellar disease," they explained.

"It is difficult under such circumstances to accept the toxic effects of alcohol as the direct causative agent. Evidence . . . and examination indicated that fully three-quarters of the patients suffered from undernutrition when they were first seen by us.

"Malnutrition may also have been a factor in the remaining patients, who came to our attention only years after the onset of their illness, after a period of abstinence and concomitant improvement in their eating habits."

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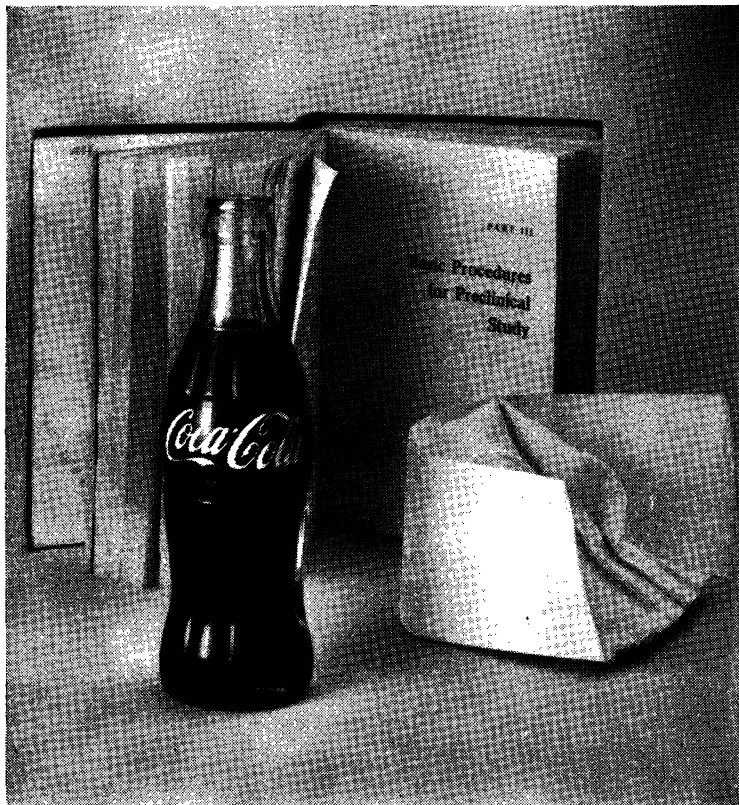
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School Deans Report on Medical Advancements During 1959

(Continued from Page 54)

chemical genetics. These include:

—The phenomenon, technically known as transduction, through which a virus can carry genetic material from one cell to another, a significant step in the field of transplantation of organs.

—Whether leukemia is produced by a virus and, if so, what virus is essential in initiating the disease.

—What part enzymes play in many diseases. An enzyme is a complex chemical substance found largely in the digestive juices of the body which acts as a catalytic agent on other substances and then causes them to split up. A number of diseases, in-

cluding epilepsy and multiple sclerosis, are thought to be of enzymatic metabolic origin.

—Study of certain diseases in which, because of hereditary abnormality, the patient fails to manufacture an enzyme, or manufactures an abnormal enzyme that will not work.

—The possibility of moving heritable traits from one cell to another.

—The role of genetic analysis as an indispensable part in the understanding of the mechanism of cancer.

—Clinical experimentation to determine the role of genetic influences on such diseases as hypertension, coronary ailments, schizophrenia, and diabetes.

—The possibility of making synthetic substances with enzyme activity and using these artificial enzymes in the control of diseases resulting from abnormal or deficient enzymes.

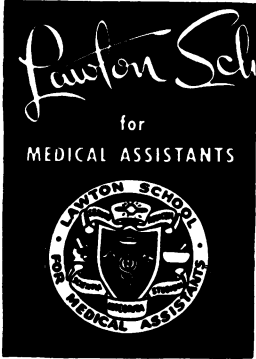
—The possibility of learning more about control of cell machinery and heredity, thereby conquering many of man's ills, including hereditary defects in metabolism and the more obscure conditions.

More Known About Chromosomes

One dean, Dr. Thomas H. Hunter of the University of Virginia School of Medicine at Charlottesville, considered the "description of chromosomal abnormalities by several groups, both here and in England," as an outstanding achievement in medicine in 1959.

(Continued on next page)

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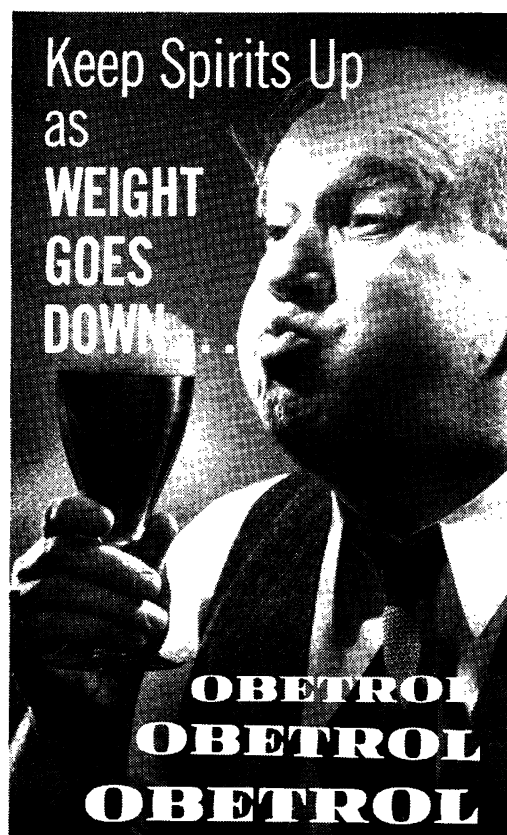
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Page 753

OBETROL PHARMACEUTICALS

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He referred particularly to last April's announcement by British investigators that an irregular number of chromosomes inside living cells are responsible for such grave conditions as Mongoloid idiocy, abnormalities of the sexual organs, and possibly leukemia. Chromosomes are the microscopic life-threads that carry the genes of heredity—such as eye, hair, and skin color—like beads on a string. They are found inside the germ cells that unite to form new organisms, such as a human fetus.

"Methods have now been devised," said Dr. Hunter, "for the mapping of human chromosomes which promises to shed light on the basic abnormalities in many other conditions, but these findings in particular impress me as being of most fundamental importance since they clearly and unequivocally label such abnormalities as genetic in origin."

Trace Chromosomes to Disease

The chromosome "mapping" and what it has revealed so far is exciting, scientifically. It proves not only that human beings can live with chromosomal abnormalities, but more importantly because each chromosome, even a very small one, can lead to some of man's gravest maladies. This raises the question as to whether some day cell researchers will be able to pin-point the basic cause of a disposition toward cancer in the future.

Dean W. C. Davison of Duke University School of Medicine, Durham, N. C., said that in his opinion the greatest single achievement in 1959 was "development of techniques for visualization of chromosomes in man and their correlation with certain disease states."

Other deans and medical school representatives who singled out as "most significant" the advancements in the general field of genetics and their impact on the understanding of health and disease included:

Drs. Robert J. Glaser, dean, School of Medicine, University of Colorado Medical Center, Denver; Robert M. Bird, associate professor of medicine and physiology, University of Oklahoma Medical Center, Oklahoma City; James W. Colbert Jr., dean, St. Louis University School of Medicine, St. Louis; Kenneth M. Earle, dean of medicine, University of Texas Medical School, Galveston, and D. W. E. Baird, dean, University of Oregon Medical School, Portland.

Two deans, Dr. Doan of Ohio State and Dr. Ralph E. Snyder of New York Medical College, believe that the development of synthetic penicillins was a great '59 achievement.

Dr. Doan termed the synthetic penicillins, reported late in 1959, a "great advance." He added that many more synthetic therapeutic agents against cancer and leukemia would be forthcoming in "the foreseeable future."

Dr. Snyder said that the synthetic penicillins "open up a whole new area of possibilities in the attack on resistant organisms."

Reasonable Precautions Can Reduce Skiing Accidents

The danger of skiing accidents is overrated and the hazards that do exist could be reduced if skiers took reasonable precautions.

This opinion was expressed in an article in *Today's Health*, which said skiing is far less dangerous than football or boxing.

The total number of ski injuries has risen sharply but not in proportion to the rise in the number of skiers in the fast-growing sport, the article said.

The risk of injuries has been reduced by safer slopes, better instructions and improved equipment, it was pointed out.

"Most of the injuries could be avoided by reasonable prudence. In short, skiing accidents are caused by lack of physical condition, lack of training, negligence, and plain recklessness."

The National Ski Patrol blames 70 per cent of the

injuries on skiers simply being "out of control."

Physicians list the following points for preventing ski injuries:

—Exercise to condition muscles before a skiing holiday.

—Warm up immediately before going out on the slope.

—Avoid major runs when tired.

—Use modern safety-release bindings.

—Take lessons if a beginner.

—Leave the trail if a stop is necessary.

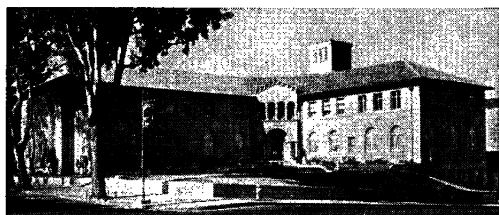
—Stop a reasonable distance from the line at a tow or lift.

—Never ski alone.

—Stay out of closed areas.

—Be twice as careful when the temperature changes.

The article was written by Raymond Schuessler, Buffalo, N. Y.



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Volume 92

FEBRUARY 1960

Number 2

Newer Hormonal Preparations

ROBERTO F. ESCAMILLA, M.D., San Francisco

IN PREPARING THIS PRESENTATION, it has become worth while to give a more than cursory glance to the carefully prepared advertising literature that pours across our desks, keeping in mind that if we consider only the newer preparations currently emphasized, we may not appreciate the entire picture of what is sound in endocrine therapy. Therefore this survey will be somewhat broader than indicated in the title.

Pituitary

It is known that the pituitary gland produces at least six different hormones.

The growth hormone (GH,STH), isolated and purified by Evans and Li in Berkeley, is now available only as prepared from human pituitaries. The supply therefore is extremely limited, but experimental trials have been promising. Attempts are being made to alter the beef growth hormone so that the molecule will approach the size of the human variety. If this preparation is biologically active in man it could provide a practical source of the hormone.

The thyrotropic hormone (TSH) is available as Thytropar® (Armour). Its principal use is in a test differentiating primary and secondary myxedema. After I^{131} uptake of the thyroid has been measured, TSH is administered in doses of 20 to 30 units daily for three days, and the uptake again measured. In normal persons the increase averages 20 per cent,

Clinical Professor of Medicine, University of California School of Medicine, San Francisco.

Submitted September 8, 1959.

• A review of the present status of various hormonal substances is presented. The pituitary preparations include various growth hormones (human and beef), still used only experimentally, thyrotropic hormone, used mainly for testing thyroid function, corticotropin—widely used—and gonadotropic hormone.

Thyroid, thyroxin and triiodothyronine preparations are considered, with USP thyroid still being most useful. Glucagon may be of some use in terminating hypoglycemia—tolbutamide is now used in many older diabetic persons. New adrenal cortical steroids are still appearing and show variation in effects; cortisone or hydrocortisone remain relatively inexpensive. Many combinations are available.

The newest addition to available male hormone preparations is fluoxymesterone which is anabolic in smaller dosage than the older forms.

Several new long acting preparations of androgens, estrogens and progesterone are available, and many ingenious combinations are presented.

in primary hypothyroidism the average is 7 per cent, while in secondary myxedema resulting from hypopituitarism the average increase of uptake is 32 per cent.

The gonadotropic hormones (follicle-stimulating hormone (FSH) and luteinizing or interstitial-cell-stimulating hormone (LH or ICSH)) are not available commercially in any satisfactory preparations. Gonadotropic effect can be obtained by using the chorionic gonadotropin from the placenta (APL,® Atutrin S®). The same hormone extracted from the

EDITORIAL

A Million Dollars for Medical Education

CASH CONTRIBUTIONS to medical schools in the United States made by the California Medical Association in the past ten years have come to almost a million dollars.

Medical schools throughout the country, along with everybody else, have suffered in recent years from the effects of inflation. The costs of educating students have risen in proportion with other costs. Salaries have advanced, equipment and building costs have grown and expenses in all departments have followed the upward trend of general prices.

Coupled with these increased costs, the medical schools have often found themselves facing boards of trustees of large universities where the losses on medical training cannot be adequately made up by surpluses in other colleges or by increased endowment income. In these circumstances it was not unexpected that some medical school deans announced themselves in favor of federal subsidies to medical schools.

It is fortunate that some farsighted medical educators, working in conjunction with business interests, established both the American Medical Education Foundation and the National Fund for Medical Education some ten years ago. The AMEF, whose administrative costs are paid by the American Medical Association, collects contributions from physicians and pays them out to the medical schools. The same procedure is followed by the National Fund, except that its source of income is business and industry.

The California Medical Association was among the earliest state medical organizations to grasp the significance of these funds and to arrange to support them. Under the California program, each member of the Association contributes a small sum each year as part of his C.M.A. dues. The proceeds are turned over to the AMEF, 80 per cent earmarked

for the three California medical schools which are not primarily tax-supported, the balance for the general fund to go equally to all medical schools.

While the contribution of the individual member (ten dollars a year, tax-deductible) is not great, the aggregate comes to a neat sum. In 1959, the Association contributed more than \$156,000 in this manner. The three private schools in California received close to \$42,000 each from this one source.

This annual effort represents medical organizations at their best—members of a profession contributing to the education of those who will follow them, even compete with them.

Medical education must be continued and must be strengthened. Federal funds which carry policy-making strings must be eschewed. The picture of today's physicians helping train tomorrow's is a pleasant sight and, we hope, a permanent monument to a graceful tradition.

Physicians and Population

"POPULATION EXPLOSION" is a term that has come into prominence in recent months.

In California, it is now quite obvious that the five medical schools in the state will not be able for some years to come to produce enough new physicians to meet the demands of a sharply increasing population.

Attention of the medical and the educational world has been focused on this problem in recent weeks through the publication of a treatise on "The West's Medical Manpower Needs." The volume comes from the Western Interstate Commission for Higher Education, popularly known as WICHE.

WICHE is the cooperative group of western educators who plan for the higher (professional) education of the youth of the 13 states making up the

California MEDICAL ASSOCIATION

NOTICES & REPORTS

Council Meeting Minutes

Minutes of the 454th Meeting of the Council, Canterbury Hotel, San Francisco, December 12, 1959.

The meeting was called to order by Chairman Lum in the English Room of the Canterbury Hotel, San Francisco, on Saturday, December 12, 1959, at 9:30 a.m.

Roll Call:

Present were President Reynolds, President-Elect Foster, Speaker Doyle, Vice-Speaker Heron, Secretary Hosmer, Editor Wilbur and Councilors MacLaggan, Wheeler, Todd, Quinn, O'Neill, Kirchner, O'Connor, Shaw, Gifford, Harrington, Davis, Sherman, Campbell, Lum, Bostick and Teall.

Quorum present and acting.

Present by invitation were Messrs. Hunton, Thomas, Clancy, Collins, Marvin, Whelan and Dr. Batchelder of C.M.A. staff; Messrs. Hassard and Huber of legal counsel; Eugene Salisbury of staff and the Public Health League of California; John Fraser of the Public Health League; county society executives Scheuber of Alameda-Contra Costa, Geisert of Kern, Pettis and Field of Los Angeles, Brayer of Riverside, Donmyer of San Bernardino, Nute of San Diego, Thompson of San Joaquin, Dochterman of Sacramento and Dermott of Sonoma; Dr. A. E. Larsen and Messrs. Paolini, Lyon and Virello of California Physicians' Service; Dr. L. E. Osgood and Mr. M. R. Karstaedt of Visalia; Dr. John Morrison, president of the Alameda-Contra Costa Medical Association; Dr. Robert Holmes, president of the San Mateo County Medical Society; Dr. Daniel Blaine, Director of the State Department of Mental Hygiene; Dr. Malcolm Merrill, Director of the State Department of Public Health; and Dr. John Keye, medical director of the State Department of Social Welfare; Dr. Russell Ferguson, health officer of Santa Cruz County, and Doctors Dan O. Kilroy, Thomas Elmendorf and Francis E. West.

1. Minutes for Approval:

On motion duly made and seconded, minutes of the 453rd Council meeting, held October 31, 1959, were approved.

2. Membership:

(a) A report of membership as of December 10, 1959, was presented and ordered filed.

(b) On motion duly made and seconded, 87 members who had become delinquent and subsequently paid their dues were voted reinstatement.

(c) On motion duly made and seconded, Doctor Bernice I. Swenson of Alameda-Contra Costa County, was voted Retired Membership.

(d) On motion duly made and seconded in each instance, four applicants were voted Associate Membership. These were: Bernhard G. Anderson, Loren W. Heather, Carol E. Query, Orange County; Clark Richardson, Tulare County.

(e) On motion duly made and seconded, reductions of dues were voted for six members because of illness or postgraduate study.

3. Liaison Committee to Social Welfare:

Dr. Sherman reported that the Liaison Committee to the State Department of Social Welfare had discussed with Dr. Russell Ferguson, public health officer of Santa Cruz County, a program which he

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Mental Disturbances Can Begin at Birth

Psychiatric disturbances can occur in babies from the time of birth, according to an article in the *Journal of the American Medical Association*.

"Insufficient attention is given to the observation that infants can have psychiatric disorders," three doctors at Mount Sinai Hospital in New York City reported. "From birth, disturbed behavior may occur. . . ."

Since a baby's range of behavior is limited, they said, such psychiatric disturbances in infancy are more likely to be expressed as bodily complaints.

"Furthermore, evidence is accumulating that emotional trauma in infancy may be of critical significance in the development of later psychiatric disorders," they said. "Early treatment seems to be the keystone to the prevention of later serious disorders."

The doctors described a case in which it was found that an eight-month-old baby's expulsion of food resulted from mental depression.

The baby lost weight and was suffering severe malnutrition because he regurgitated his food within minutes after being fed. On admission to the hospital, he appeared wasted, chronically ill and unhappy.

During the first month in the hospital, the baby was given different regimens, but none had any long-lasting success.

At this point, psychiatric evaluation was requested. The psychiatrists diagnosed the problem as

a reaction resulting from "infantile anxiety neurosis with depression."

Doctors interviewed the mother and found her to be depressed. They discovered that the baby's problem developed after the mother ceased to give him any love or attention.

A special nurse was then assigned to the baby to give him constant warmth and attention. After this, the baby gradually ceased to regurgitate and gained weight. He also became more responsive and happy. The mother also was treated through psychiatric interviews.

Two and a half months after he was admitted, the baby was discharged from the hospital. The mother continued to receive psychiatric help, and the baby continued to improve and develop normally.

"This case also demonstrates the need for maternal love, fondling, and attention for the well-being and normal development of an infant," the doctors concluded.

"Psychiatric treatment of an infant must involve the mother as an integral part of the baby. When the mother cannot be involved directly in treatment, a mother-surrogate must be supplied since an infant cannot progress without a mother-child inter-relationship.

"We are attempting to develop a 'mother bank' of volunteers who would be able, under supervision, to act as mother-surrogates when needed."

The authors of the article were Drs. Myron L. Stein, Aaron R. Rausen, and Abram Blau.

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Vitamin B-6	0.8 mg.

Vitamin B-12 (Cobalamin conc. NF)	2 mcg.
Folic Acid	0.25 mg.
Niacinamide	10 mg.
Vitamin K (Menadiolone)	0.25 mg.
Rutin	10 mg.
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Fluorine (Calcium Fluoride)	0.25 mg.
Iodine (Potassium Iodide)	0.15 mg.

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Handbook on Chemical Tests For Intoxication Issued

A handbook on "Chemical Tests for Intoxication" has been published by the American Medical Association.

The manual, prepared by the American Medical Association Committee on Medicolegal problems, reaffirms the American Medical Association's long-standing recommendation that law enforcement agencies adopt chemical tests in all cases of suspected drunk driving.

"It is hoped . . . that all enforcement agencies will adopt chemical tests in all cases of suspected drinking to insure protection of the innocent as well as conviction of the guilty," the booklet said.

". . . chemical tests are invaluable, because, for the first time, they take the matter of the sobriety or drunkenness of the individual from the realm of speculation and reduce it to almost mathematical certainty.

"With the use of these tests, judges and juries no longer have to depend entirely on the opinion of lay witnesses based upon objective symptoms."

The 103-page manual is designed as "a handbook of information which will assure the competent and proper use of the chemical tests."

The manual includes statistics on the role of alcohol in traffic accidents, a description of chemical tests and commercial devices for measuring drunk-

ness, legal aspects of chemical tests, and suggestions on how to organize a program of chemical tests for intoxication.

It points out that four independent surveys agreed that alcohol is involved in half of the nation's motor vehicle accidents and that the death and injury toll can be materially lessened by eliminating the alcohol factor.

It concludes that a program of chemical testing of suspected drunk drivers "is bound to inspire compliance with the law.

"It puts the police department in the enviable position of being able to tell drivers what is going to be done—and then to be able to do it—with legal and medical backing."

The manual was written by experts in the fields of medicine, law, and traffic safety. It is believed to be the only authoritative handbook on the subject. The manual is available to doctors without charge.

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New Way of Screening Blood Donors Reported

A new method for reducing the incidence of hepatitis resulting from blood transfusions was reported recently.

A "more useful" method of detecting carriers of the liver disease among blood donors was described in the *Journal of the American Medical Association*.

The selection of uninfected donors by blood banks is a difficult problem, one reason being that a person may carry the disease-causing virus although he has no previous history of hepatitis and shows none of its symptoms.

The prevalence of hepatitis carriers among the

general population is believed to range from one-half of one per cent to six per cent.

An estimated five million blood transfusions are given in the United States each year and "15,000 to 100,000 cases" of hepatitis can be expected to result, according to the *Journal* article.

"These patients are, as a rule, out of work for an average of six weeks and one to five per cent will die," it said.

In a study conducted at the Medical Service and Blood Bank of the Memorial Center and the Sloan-Kettering Institute for Cancer Research, New York City, doctors used a screening test based on increased activity of certain chemical compounds

(Continued on Page 104)

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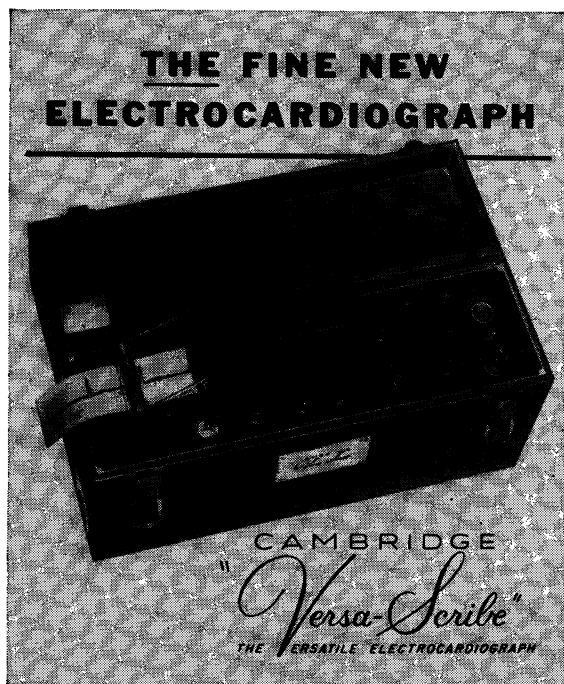
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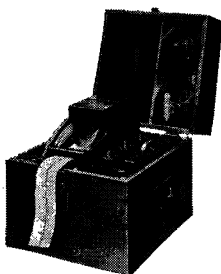
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New Way of Screening Blood Donors Reported

(Continued from Page 82)

(known as SGO-T) in the donors. This activity appeared to be evidence of impending hepatitis.

The researchers found "a significantly higher incidence of viral hepatitis" among recipients of blood with abnormal SGO-T activity than those who received blood with a normal SGO-T level.

They concluded that this test was "a more useful method for detecting silent carriers of hepatitis virus than other tests of liver function previously evaluated. . . ."

However, they said "unpredictable variables do not permit us, on the basis of this study, to draw definite conclusions about the advisability of discarding bloods with abnormal SGO-T activity."

They said they felt that their results did warrant further study to determine whether the method is reliable enough to be instituted as a standard screening measure in all blood banks.

Participating in the study were Drs. Nils U. Bang, Paul Rueggesser, Allyn B. Ley, and John S. LaDue.

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New Antibiotic Proves Effective For Minor Infections

Griseofulvin has been termed an effective means of treating superficial fungus infections of the skin.

Dr. C. H. McCuistion, Jr., Austin, Texas, dermatologist, writing in the *Journal of the American Medical Association*, said "griseofulvin is an effective antibiotic for superficial fungus infections and is safe in therapeutic doses.

Dr. McCuistion, assistant clinical professor of dermatology, Baylor University Postgraduate School of Medicine, reported on the use of griseofulvin in the control of ringworm infection of 28 children at the Austin State School for the mentally retarded and 4 private patients.

Treatment of the 29 patients suffering either ringworm of the scalp or ringworm of the body resulted in a cure in all but one case, he said.

The three patients with an infection of the finger nails and toe nails are still under treatment, he said, and the use of griseofulvin failed to cure one patient with an infection of the feet.

"No instance of intolerance to griseofulvin requiring reduction of the dosage or cessation or administration of the drug was encountered," Dr. McCuistion said.

Griseofulvin is a fermentation product of three species of penicillium he said, and was isolated in

(Continued on Page 110)

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BOOKS RECEIVED

Books received by CALIFORNIA MEDICINE are acknowledged in this column. Selections will be made for more extensive review in the interests of readers at space permits.

DOCTOR STRAND—Boris Sokoloff. Vantage Press, Inc., 120 W. 31st Street, New York 1, New York, 1960. 205 pages, \$3.50.

THE HUMAN SPINE IN HEALTH AND DISEASE—Anatomicopathologic Studies—George Schmorl, M.D.; Clinicoradiologic Aspects—Herbert Junghanns, M.D. The First American Edition, Translated and Edited by Stefan P. Wilk, M.D., and Lowell S. Goin, M.D. Grune & Stratton, Inc., 381 Fourth Avenue, New York 16, New York, 1959. 285 pages, \$21.00.

INTRODUCTION TO COLPOSCOPY—A Diagnostic Aid in Benign and Precancerous Lesions of the Cervix Uteri—Karl A. Bolten, M.D., Gynecologist and Research Associate, Dept. of Pathology, Subdivision Obstetric and Gynecologic Pathology, University of Oklahoma, School of Medicine. Cooperating in Pathology, William E. Jaques, M.D., Chairman and Professor of Pathology, University of Oklahoma, School of Medicine; with Forewords by Joe Vincent Meigs, M.D., and Daniel W. Goldman, M.D. Grune & Stratton, Inc., 381 Fourth Avenue, New York 16, New York, 1960. 76 pages, \$7.75.

THE STORY OF DISSECTION—Jack Kevorkian, M.D. Philosophical Library, Inc., 15 East 40th Street, New York 16, New York, 1959. 80 pages, \$3.75.

BEHAVIORAL CHANGE IN THE CLINIC—A Systematic Approach—Gerald R. Pascal, Ph.D., Professor of Psychology, Director of the Clinical Training Program in Psychology and Director of the Psychological Service Center, University of Tennessee. Grune & Stratton, 381 Fourth Avenue, New York 16, New York, 1959. 128 pages, \$4.75.

MICROBIAL VARIATION—Edited by V. D. Timakov, member of the Academy of Medical Sciences of the U.S.S.R. Translated from the Russian by G. H. Beale. Pergamon Press Inc., 122 East 55th Street, New York 22, New York. 202 pages, \$6.50.

SMOKING AND HEALTH—Alton Ochsner, M.D. Julian Messner, Inc., 8 West 40th Street, New York 18, New York, 1959. 108 pages, \$3.00.

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New Antibiotic Proves Effective For Minor Infections

(Continued from Page 108)

1939, the same year that the antibiotic effect of penicillin was discovered.

"Penicillium, the source of griseofulvin, emerged in 1959 as a still further boon to man," he said. "Of course, unheralded and unrecognized, this lowly mold has worked for man all along.

"... like the sulfonamides and penicillin, griseofulvin was known many years before its value to man himself was appreciated. One wonders if perhaps a cure for cancer, tuberculosis, diabetes or mental illness is not now on the chemist's shelf."